

**COMBINED DECLARATION AND POWER OF ATTORNEY
(UTILITY OR DESIGN PATENT APPLICATION)**

As a below named inventor I hereby declare that:

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention (design, if applicable) entitled:

SYSTEM AND METHOD FOR PERFORMING KERNEL-MODE OPERATIONS

(Insert Title)

IDENTIFICATION OF SPECIFICATION

The specification of which is attached hereto. If the application is not attached hereto, the specification:

(If specification is not attached, fill in applicable information below)

_____ was filed on _____ as U.S. or PCT International Application No. _____
and was amended on _____.

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

FOREIGN PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's certificate(s), or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below, by checking a box, any foreign application(s) for patent or inventor's or plant breeder's certificate or any PCT international application(s) designating at least one country other than the United States of America having a filing date before that of the application on which priority is claimed.

FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION

APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	Priority <u>Not</u> Claimed
92100252	Taiwan, R.O.C	7-Jan-2003	<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

_____ Additional foreign application(s) filed within 12 months (6 months for design) are listed on supplemental sheet.

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional applications(s) listed below:

APPLICATION NUMBER	DATE OF FILING (day, month, year)

_____ Additional provisional application(s) are listed on supplemental sheet.

FOREIGN/PCT APPLICATION(S) FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION

APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)

_____ Additional foreign application(s) filed more than 12 months (6 months for design) prior to this application are listed on supplemental sheet.

CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATIONS UNDER 35 U.S.C. § 120

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT Application in the matter provided by the first paragraph of Title 35, United States Code, §112, I acknowledge a duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

APPLICATION NUMBER	DATE OF FILING (day, month, year)	STATUS (patented, pending, abandoned)

_____ Additional US/PCT priority application(s) are listed on supplemental sheet.

POWER OF ATTORNEY

I hereby appoint the practitioner(s) at Customer No. **34,283** as my attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Please direct all correspondence to:

Customer No. **34,283**

Quintero Law Office
1617 Broadway, 3rd Floor
Santa Monica, CA 90404

Please direct telephone calls to:

Nelson A. Quintero, Esq.
1-310-401-6180

AUTHORIZATION TO ACCEPT INSTRUCTIONS FROM REPRESENTATIVE

I hereby authorize the practitioner(s) identified above to act and rely on instructions from and communicate directly with the person/attorney/firm/organization who/which first sends/sent this case, unless the inventor(s) or assignee(s) provide written notice to the contrary.

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full Name Of Inventor 1	Family Name LIU	First Given Name Wei-Hong	Second Given Name
Residence & Citizenship	City Taipei Hsien	State or Foreign Country Taiwan, R.O.C.	Country of Citizenship Taiwan, R.O.C.
Mailing Address	21Fl., 88, Sec. 1, Hsin Tai Wu Rd., Hsichih, Taipei Hsien 221, Taiwan, R.O.C.		
Signature of Inventor 1:			Date: OCTOBER *8, 2003
Full Name Of Inventor 2	Family Name	First Given Name	Second Given Name
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
Mailing Address			
Signature of Inventor 2:			Date:
Full Name Of Inventor 3	Family Name	First Given Name	Second Given Name
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
Mailing Address			
Signature of Inventor 3:			Date:
Full Name Of Inventor 4	Family Name	First Given Name	Second Given Name
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
Mailing Address			
Signature of Inventor 4:			Date:
Full Name Of Inventor 5	Family Name	First Given Name	Second Given Name
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
Mailing Address			
Signature of Inventor 5:			Date:

— Additional inventor(s) are listed on supplemental sheet.